PART B - FEE(S) TRANSMITTAL

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DICKSTEIN SH 1177 AVENUE O 41 ST FL. NEW YORK, NY	P Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below.							
05/25/2005 MBEYENE2 00000026 09991358				(Depositor's name)				
2000 63			<u>a</u>	(Signature)				
01 FC:1501 02 FC:1504	1400.00 BP 300.00 BP '	MAY	((Datc)		
03 FC:800 PLICATION NO.	FILING DATE OR	्री	FIRST NAMED INVENTOR		ATTORNEY DOCKET NO.	CONFIRMATION NO.		
09/991,358	AUR		Atsushi Fukuzato	P/433-128 4197				
TITLE OF INVENTION: O	CHARACTER INPUTTING N	METHOD FOR A H	ANDY PHONE US	ING A SEESAW KEY	Y AND A DEVICE THEREF	OR		
APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PU	BLICATION FEE	TOTAL FEE(S) DUE	DATE DUE		
nonprovisional	NO	\$1400		\$300	\$1700	06/01/2005		
EXAM	MINER	ART UNIT	CL	ASS-SUBCLASS	,			
TRAN, C	ONGVAN	2683		455-090300	•			
"Fee Address" indica PTO/SB/47; Rev 03-02 Number is required. 3. ASSIGNEE NAME AND	EE .	tion form of a Customer E PRINTED ON THe low, no assignee da of this form is NOT a	2 registered patent listed, no name wil IE PATENT (print o ata will appear on the a substitute for filing RESIDENCE: (CIT	ingle firm (having as or agent) and the nan attorneys or agents. If I be printed.	nee is identified below, the d	locument has been filed for		
NCC Please check the appropriate	COMPONO e assignee category or category			☐ Individual	Corporation or other private gr	oup entity Government		
4a. The following fee(s) are	enclosed:	_	Payment of Fee(s):					
Lesue Fee			A check in the amount of the fee(s) is enclosed. A check in the amount of the fee(s) is enclosed. Sayment by credit card. Form PTO-2038 is attached.					
			The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 50.2215 (enclose an extra copy of this form).					
a. Applicant claims S	(from status indicated above MALL ENTITY status. See 3	37 CFR 1.27.	<u></u>		LL ENTITY status. See 37 C			
The Director of the USPTO NOTE: The Issue Fee and P interest as shown by the rec	is requested to apply the Issilublication Hee (if required) words of the Unifed States Fate	e FeeAnd Publication vill not be accepted for the and Trademark O	on Fee (if any) or to a from anyone other the office.	e-apply any previous an the applicant; a reg	ly paid issue fee to the applications attorney or agent; or t	ation identified above. he assignee or other party in		
Authorized Signature	Michael	A Chec	2	Date	May 23	3,2005		
Typed or printed name _	Muchael	10.00	cheer	Registration		425		
This collection of informati- an application. Confidential submitting the completed a this form and/or suggestion Box 1450, Alexandria, Virg Alexandria, Virginia 22313	ity is governed by 35 U.S.C. pplication form to the USPTO of for reducing this burden, shoin a 22313-1450. DO NOT S	11. The information 122 and 37 CFR 1. O. Time will vary ould be sent to the (SEND FEES OR CO	is required to obtain 14. This collection is epending upon the Chief Information O OMPLETED FORM	or retain a benefit by sestimated to take 12 individual case. Any cofficer, U.S. Patent and S TO THIS ADDRES	the public which is to file (an minutes to complete, includir omments on the amount of ti I Trademark Office, U.S. Dep S. SEND TO: Commissioner	d by the USPTO to process) ng gathering, preparing, and me you require to complete artment of Commerce, P.O. for Patents, P.O. Box 1450,		

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PTO/SB/17 (12-04v2)
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Effective on 12/08.	/2004.	Complete if Known Application Number 09/991,358-Conf. #4197							
Fees pursuant to the Consolidated Approp		Application Number		November 19, 2001					
FEE TRANS	WIIIAL	1 11 11 11 11		<u> </u>					
For FY 20	005	First Named Inventor Examiner Name		C. Tran					
	- C 27 CED 1 27	0000							
Applicant claims small entity stat	Art Unit								
TOTAL AMOUNT OF PAYMENT	Attorney Docket No. J0433.0128								
METHOD OF PAYMENT (check all that apply)									
Check X Credit Card Money Order None Other (please identify):									
Deposit Account Deposit Account Number: 50-2215 Deposit Account Name: Dickstein Shapiro Morin & Oshinsky LLP									
For the above-identified depo	osit account, the Director i	s hereby authorized to	: (check all that apply)					
Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee									
Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17									
FEE CALCULATION									
1. BASIC FILING, SEARCH, AND E			/ A A 41A 1 A T 1 CA 1 C T T T T						
FI	LING FEES SE Small Entity	ARCH FEES EX Small Entity	AMINATION FEES) Sm <u>all Entity</u>						
Application Type Fee (\$			ee (\$) Fee (\$)	Fees Paid (\$)					
Utility 300	150 500	250	200 100						
Design 200	100 100	50	130 65						
Plant 200	100 300	150	160 80						
Reissue 300	150 500	250	600 300						
Provisional 200	100 0	0	0 0						
2. EXCESS CLAIM FEES Small Entity									
Fee (\$) Fee (\$)									
Each claim over 20 (including Reissues) 50 2									
Each independent claim over 3 (incl	200 100								
Multiple dependent claims				360 180					
Total Claims Extra Claims	Fee (\$) Fee	Paid (\$)	Multiple Depend						
- 20 =	x =		<u>Fee (\$)</u>	Fee Paid (\$)					
Indep. Claims Extra Claims	Fee (\$) Fee	Paid (\$)							
-3=	· =	 							
3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).									
Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)									
100 = /50 (round up to a whole number) x =									
4. OTHER FEE(S) Non-English Specification \$130) fee (no small entity disc	ount)		rees raid (4)					
Non-English Specification, \$130 fee (no small entity discount)									
1504 Publication fee for early, voluntary, or normal 300.00									
8001 Printed copy of patent w/o color 30.00									
SUBMITTED BY // ~/ //									
Signature Wilched	1. Loca	Registration No. (Attorney/Agent) 34	,425 Telephone	(212) 896-5472					
Name (Print/Type) Michael J. Schee			Date	May 23, 2005					